



Fall 2016 Adult Basketball

GENERAL INFORMATION

- Fall season begins the week of Sunday, September 11, 2016
- League consists of 10 games and playoffs for qualifying teams
- Players who do not have a team may contact us at (310) 781-7590 to be put on the free agent list. You are not guaranteed to be placed on a team
- League divisions (team placement) are determined by league directors (program needs)
- Game location: Dee Hardison Sports Center at Wilson Park (2200 Crenshaw)
- League rules and roster waiver forms are available at www.TorranceCA.Gov/Parks/7505.htm
- Full refunds available **only** upon league cancellation
- All players **must** be at least 18 years to play – NO EXCEPTIONS
- **Managers' meeting will be held at the Dee Hardison Sports Center on Wednesday, September 7, 2016 at 7:45 p.m.**

REGISTRATION DATES

- Registration begins Monday, August 1, 2016 at 8:00 a.m.
- All registration ends Friday August 26, 2016 at 5:00 p.m.
- All team registrations will be taken on a first-come first-serve basis

**** FEES: (All fees include the cost for Basketball Officials)**

- **Online Registration is Now Available!**
- \$715.00 fee per team; Full payment is due at the time of registration.
- Includes 10 games plus playoffs for qualifying teams. (6 teams per league maximum)

REGISTRATION OFFICE INFORMATION

How to Register: Online, in-person, fax, phone in or by mail.

Hours: Monday through Thursday and alternating Fridays 8:00 a.m. to 5:00 p.m.

Online: Team Manager must create an account online. Online registrants will pay an additional 2 ½ % convenience fee (Non-Refundable) based on the total of the league fees. Info at www.ClassSchedule.TorranceCA.Gov

Phone: (310) 618-2720 Registration Office.

Fax: (310) 781-7598 Faxed registrations will be processed as time permits.

In-Person/Mail: City of Torrance Community Services Department. Attn: Registration Office
3031 Torrance Boulevard
Torrance, CA 90503

Payment: Check, cash, money order, or credit card (Visa, MasterCard, American Express or Discover). Please do not mail cash. Checks and money orders should be made payable to the "City of Torrance."

For more information, please call (310) 781-7590 or email GCraig@TorranceCA.Gov



ADULT BASKETBALL LEAGUE REGISTRATION FORM

PLEASE PRINT YOUR INFORMATION LEGIBLY.

CONTACT INFORMATION

TEAM NAME: _____ DIVISION: _____

LAST SEASON'S TEAM NAME: _____ DIVISION: _____

TEAM MANAGER'S NAME: _____
Last First

HOME PHONE: _____ WORK PHONE: _____ CELL: _____

EMAIL ADDRESS: _____

ADDRESS: _____

CITY: _____ ZIP: _____

ADULT BASKETBALL DIVISIONS & SKILL CLASSIFICATION (SELECT DAY and LEAGUE)

DAY OF WEEK (select one)	GAME TIMES	LEAGUE (select one)
SUNDAY AFTERNOON	1:00 p.m. – 4:00 p.m.	D1 Novice
SUNDAY AFTERNOON	1:00 p.m. – 4:00 p.m.	D2 Novice
SUNDAY EVENING	5:00 p.m. – 8:00 p.m.	D Novice
SUNDAY EVENING	5:00 p.m. – 8:00 p.m.	C/D Intermediate
WEDNESDAY EVENING	7:00 p.m. – 10:00 p.m.	D Novice
WEDNESDAY EVENING	7:00 p.m. – 10:00 p.m.	C/D Intermediate
THURSDAY EVENING	7:00 p.m. – 10:00 p.m.	D1 Novice
THURSDAY EVENING	7:00 p.m. – 10:00 p.m.	D2 Novice

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METHOD OF PAYMENT

☐ CHECK ☐ VISA ☐ MASTERCARD ☐ American Express ☐ Discover

CREDIT CARD #: _____

Expiration date: ____ / ____ I authorize the use of my credit card in the amount of: \$ _____

Print name as it appears on card: _____

Cardholder signature: _____ Date: _____

For Office Use Only. Receipt Number: _____ Transaction Date: _____ Staff _____